Request for Continued Examination (RCE) Transmittal

Address to:
Mail Stop RCE
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application No.	10/530,171
Confirmation No.	9015
Filing Date	May 17, 2005
First Named Inventor	Hirakawa et al.
Group Art Unit	1643
Examiner Name	Lynn Anne Bristol
Attorney Docket No.	235054
Client Reference No.	M3E-183967/YKW

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

1.	1. Submission required under 37 CFR 1.114										
	a. 🛛 Previously submitted										
		i.	Conside	r the am	nendment(s)/	reply unde	r 37 CFR	1.116 previou	sly filed o	on February 3, 2	2009.
		1			endment(s) refer						
		ii.		r the arc	juments in th	ie Appeal i	3rief or Re	eply Brief prev	iously file	ed on	
		iii.	Other:								
	b.		Enclosed		_						
l		i.	Amendm					Form PTC			
		ii.	Affidavit(s)/Decia	aration(s)		٧.			es listed in For	m PTO-1449
		iii. I	□ Informati	ion Disc	losure State	ment (IDS)	ı vi	Other:	J.S. patent	s and applications)	
2.	Mis		aneous	.011 2100	1000,0 010.0.	mone (155)	*				
				of actior	n on the abov	ve-identifie	d applicat	ion is requeste	ed under	37 CFR 1.103(c) for a period
l	-		•					onths; fee under 3		•	-,
	b.				all entity statu					(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	C.		Other:		,		_				
3.	Fee	es - T	he RCE fee	under 3	7 CFR 1.17(e) is requir	ed by 37	CFR 1.114 wh	en the R	CF is filed.	
	a.							otal amount inc			
								37 CFR 1.17(0.04	\$810.00
		ii.						R 1.136 and 1.17)			\$ 0.00
		iii.	☐ An exten				•	ired and the fe		erefor of	Ψ 0.00
								total amount of			
			requeste			J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	0 10 . 				
		iv.			xtension of ti	me (includi	ing the pe	eriod noted abo	ove, if che	ecked), as	
								nder the prese			\
								the appropriat			
		٧.			ction fee of \$				•		\$ 0.00
		vi.	Other:			,					
		vii.	 ☐ Claim fee	е						673 b	
			CLAIMS		HIGHEST						
			REMAINING	1 7	NUMBER	EXTRA		ADD'L		ADD'L	
<u>م.</u> ۵	=		AFTER		PREVIOUSLY	CLAIMS	D	CLAIM	D	CLAIM	6
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FIRST PRESENTATION OF MULTIPLE CLAIM + 195 = \$0.00 + 390 = \$0.00 Total amount to be charged to Deposit Account											
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In re Application of Hirakawa et al. Application No. 10/530,171

REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL (continued)

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED									
Name (Print/Type)	John Kilyk, Jr.	Registration No. (Attorney/Agent)	30,763						
Signature	John Kill &	Date	March 18, 2009						
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